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**United States Courts** 

III in this informs	otion to idan	tife your oppor				Southern District	ı
Ill in this inform Debtor 1	Allen	ury your case.	Holmes			APR 04	2016
Denior	First Name	Middle Name	Last Name	c	heck if this is:		
Debtor 2	Rosanne		Holmes Last Name	D	An amend	Add Bradley C	lek of Co
(Spouse, if filing)	First Name	Middle Name		-		- t showing post-pe	
United States Bankri	uptcy Court for th	e: <u>SOUTHERN</u>	DISTRICT OF TEXAS	s   C	J ''	come as of the fo	
Case number	15-32515-H2-	13			•		-
(if known)					MM / DD / YY	YY	
fficial Form B 6	61						
chedule I: You							12 <i>l</i> ·
nedule 1. Tol	ur income						1 21
	umber (if known be Employme	ent					
	be Employme	ent	Debtor 1		Debtor 2 or	non-filing spou	se.
art 1: Descri	be Employme yment		Debtor 1			non-filing spou	se
Fill in your employ information.  If you have more the job, attach a separate.	be Employme yment nan one ate page Em	ent ployment status	✓ Employed		☑ Employ	/ed	se
Fill in your employ information.  If you have more the	be Employment  nan one tate page Empout  ers.	ployment status	<ul><li>✓ Employed</li><li>☐ Not employed</li></ul>		☑ Employ ☐ Not em	/ed	se
Fill in your employ information.  If you have more the job, attach a separation with information ab additional employe	be Employment  man one ate page Employet  pout  prs. Occ		✓ Employed	ractor	☑ Employ	/ed	se
Fill in your employ information.  If you have more the job, attach a separation with information ab	be Employment  man one ate page Employet  pout  prs.  Occ seasonal,	ployment status	<ul><li>✓ Employed</li><li>☐ Not employed</li></ul>	ractor	☑ Employ ☐ Not em	ved ployed	se
Fill in your employ information.  If you have more the job, attach a separation with information ab additional employed Include part-time, so or self-employed with the control of the part-time, so or self-employed with the control of the part-time, so or self-employed with the part-time and the part-time, so or self-employed with the part-time and	be Employment  man one ate page Employet  pout  prs. Occ seasonal, york. Employers	ployment status	☑ Employed ☐ Not employed Accountant - Cont	ractor	☑ Employ ☐ Not em Forester Harris Cou	yed oployed unty	se
Fill in your employ information.  If you have more the job, attach a separation with information ab additional employe.  Include part-time, so or self-employed we self-employed	be Employment  man one ate page Employet  pout  prs. Occ seasonal, york. Employers	ployment status cupation ployer's name	Employed Not employed Accountant - Control 2203 Timberloch	ractor	☑ Employ ☐ Not em Forester Harris Cou	yed uployed unty ie, 14th Floor	se
Fill in your employ information.  If you have more the job, attach a separation with information ab additional employe.  Include part-time, so or self-employed with the companion of the self-employed with the companion of the c	be Employment  man one ate page Employet  pout  prs. Occ seasonal, york. Employers	ployment status cupation ployer's name	Employed Not employed Accountant - Control 2203 Timberloch Suite 115 Number Street		Forester  Harris Cou  1310 Prair  Number Street	yed oployed unty ie, 14th Floor	
Fill in your employ information.  If you have more the job, attach a separation with information ab additional employe.  Include part-time, so or self-employed with the companion of the part-time with the companion of the part-time with the companion of the part-time with the pa	be Employment  man one ate page Employet  pout  prs. Occ seasonal, york. Employers	ployment status cupation ployer's name	Employed Not employed Accountant - Control 2203 Timberloch Suite 115 Number Street The Woodlands	TX 77380	Forester  Harris Cou  1310 Prair  Number Street	yed aployed unty ie, 14th Floor et	77002
Fill in your employ information.  If you have more the job, attach a separation with information ab additional employe.  Include part-time, so or self-employed with the companion of the part-time of the companion of the compani	be Employment  man one ate page Employers. Occoseasonal, york. Employers, clude Employers, aker, if it	ployment status cupation ployer's name	Employed Not employed Accountant - Control 2203 Timberloch Suite 115 Number Street  The Woodlands City		Forester  Harris Cou  1310 Prair  Number Street	unty ie, 14th Floor et  TX State	

#### Part 2: **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$3,075.00	\$4,116.67
3	Estimate and list monthly overtime pay.	3. +	\$0.00	\$0.00
A	Calculate.gross.incomeAdd.line.2.+.line.3	4.	\$3,075.00	\$4,116.67

Official Form B 6I

	Deb	otor 1	Allen	Holmes		Case num	nber (if known)	15-32	515-H2-13
			First Name	Middle Name Last Name	F	or Debtor 1	For Debtor 2	or	
							non-filing spo	use	
		Con	v line 4 here		A	\$3,075.00	\$4,116.6	<b>57</b>	
	5.	-	ali payroli dec						
				e, and Social Security deductions	5a.	\$696.49	\$556.5	55	
				ontributions for retirement plans		\$0.00	\$0.0	0	
				ntributions for retirement plans		\$0.00	\$288.8	36	
				ayments of retirement fund loans		\$0.00	\$0.0	)0	
		5e	.lnsurance		5e.	\$0.00	\$269.2	<u>25</u>	
		5£	.Domestic.sup	aport obligations	5f.	\$0.00	\$0.0		
*****	•••••	<b>5</b> g	aub.ndues		5 <b>g</b> .	\$0.00	\$0.0	<u>)0</u>	
		5h.	Other deduct Specify:	ions.	5h.+	\$0.00	\$0.0	)0	
	6.	Add 5g +		eductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f +	6.	\$696.49	\$1,114.6	<u> </u>	
	7.	Calc	ulate total mo	onthly take-home pay. Subtract line 6 from line 4.	7.	\$2,378.51	\$3,002.0	)1_	
	8.			me regularly received:	80	<b>\$0.00</b>	¢n (	10	
******	•••••	Ba	business, pro	rom.rental.property.and.from.operating.a ofession, or farm	8a.	\$0.00	\$0.0	<u>,,,                                  </u>	
			gross receipts	ment for each property and business showing , ordinary and necessary business expenses, and hly net income.					
		8b	.Interest.and.o	dividends	8b.	\$0.00	\$0.0	)0	
		8c.	,	ort payments that you, a non-filing spouse, or a gularly receive	8c.	\$0.00	\$0.0	<u>)0</u>	
			Include alimor	ny, spousal support, child support, maintenance, ment, and property settlement.					
		8d	.Unemployme	nt.compensation	8d.	\$0.00	\$0.0	)0	
				ity		\$0.00	\$0.0	_	
		8f.	Other govern	ment assistance that you regularly receive					
			cash assistan	assistance and the value (if known) or any non- ce that you receive, such as food stamps or the Supplemental Nutrition Assistance Program) bsidies.					
			Specify:		8f.	\$0.00	\$0.0	)0	
	•••••	<b>.g</b>	.P.ension.or.re	etirement income	8g.	\$0.00	\$0.0	)0_	
		8h.	Other month! Specify:	y income.	8h. <b>+</b>	\$0.00	\$0.0	00_	
	9.	Add	all other inco	me. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	\$0.0	00	
•••••	10	<b>Cal</b> c	ulate.monthly the entries in li	r.incomeAdd.line.7.+.Jine.9ine 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,378.51	+ \$3,002.0	)1 =	\$5,380.52
	11.	Inclu		ular contributions to the expenses that you list in S ns from an unmarried partner, members of your housel			r roommates, an	d other	
		Do n	ot include any	amounts already included in lines 2-10 or amounts tha	t are no	ot available to pay e	expenses listed in	n Sched	ule J.
		Spec	cify:				1	1. +	\$0.00
	12.	inco		n the last column of line 10 to the amount in line 11. amount on the Summary of Schedules and Statistical applies.					\$5,380.52 Combined monthly income
	13.	Do v	ou expect an	increase or decrease within the year after you file t	his forn	n?			
	3		No. Yes. Explain:	Debtor's income fluctuates monthly.	, ••••				

F	ill in this inforn	nation to id	entii	y your case:			Che	ck if this	s is:	
	Debtor 1	Allen First Name		Middle Name	Holm Last Na		🗵	An ame	ended filing lement showing	post-petition
1	Debtor 2 (Spouse, if filing)	Rosanne First Name	······································	Middle Name	Holm Last Na		-  -		r 13 expenses a ng date:	s of the
	United States Bank	ruptcy Court fo	or the:	SOUTHERN D	ISTRICT O	FTEXAS	_	MM / D	D/YYYY	
ł	Case number (if known)	15-32515-	H2-13	3					rate filing for De 2 maintains a s	ebtor 2 because eparate household
01	fficial Form B	6J								
	hedule J: Yo		nse	3						12/13
COI	as complete and a rect information. I ne and case numb	f more space	is ne	eded, attach anoti	her sheet to					
P	art 1: Descr	ibe Your H	ouse	hold						
1.	Is this a joint cas	e?								
	<b>☑</b> No	Debtor 2 live i		parate household						
2.	Do you have dep	endents?		No		_				
	Do not list Debtor Debtor 2.	1 and		Yes. Fill out this in for each depender		Dependent's rel Debtor 1 or Deb		to	Dependent's age	Does dependent live with you?
	Do not state the dependents' name	es.								Yes No Yes
										☐ No
										Yes No
										Yes
										No No
3.	Do your expense expenses of peop yourself and your	ole other than		✓ No ☐ Yes						- ∏ Yes
P	art 2: Estima	ate Your Or	ngoir	ng Monthly Ex	oenses					
to r	imate your expense eport expenses as form and fill in the	of a date afte	r the	ruptcy filing date bankruptcy is file	unless you a d. If this is a	re using this form supplemental Scl	as a sup hedule J,	plemer check	it in a Chapter the box at the t	13 case op of
	ude expenses paic h assistance and h			-	-		f		Your expens	es
4.				nses for your resi				4	j,	
	If not included in	line 4:								
	4aReal estate ta	ixes		***************************************				4	a	M +
	4b. Property, hom	neowner.'s,.or.r	enter!	s.insurance			••••••	4	b	
	4c. Home mainte	nance, repair,	and.u	pkeep.expenses				4	.c\$8	3.39
	4d. Homeowner's	.association.o	r. cond	ominium.dues	**********	*************************		4	sd. \$7	5.00

Deb	tor 1	Allen	Holmes	Case number (if known)	15-32515-H2-13
		First Name	Middle Name Last Name		•
				Your e	expenses
5.	Add	itional mortgage p	payments for your residence, such as home equity loans	5. <u> </u>	
6.	Utili	ties:			
	6a	.Electricity,.heat,.n	natural.gas	6a.	\$292.89
			bage collection		
			hone, Internet, satellite, and.		\$167.46
		cable services			\$213.16
		Other. Specify: _			
7.			ing supplies		\$740.54
8.			en's education costs		
9.	Clot	hing, laundry, and	d.dry.cleaning	9.	\$46.13
10.	Pers	sonal care produc	cts and services	10.	\$63.10
11.	Med	lical and dental ex	xpenses	11	\$163.75
12.		nsportationInclude	de.gas, maintenance, bus or trainar payments.	12.	\$470.87
13.		ertainment, clubs, pazines, and book	, recreation, newspapers,	13.	\$55.55
14.	•	•	ons and religious donations	14.	\$30.00
15.		urance. not include insuran	ce deducted from your pay or included in lines 4 or 20.		
	15a.	Life.insurance		15a.	
	15b.	Health insurance	e	15b.	
	15c.	Vehicle.insurano	C&	15c,	\$190.22
	15d.	Other insurance	e. Specify:	15d.	
16.	Taxe		de taxes deducted from your pay or included in lines 4 or 20.		
	Spec	cify: Income tax	( withholding	16.	
17.	Inst	allment or lease p	payments:		
	17a.	Car.payments.fc	or Vehicle 1.	17a	
	17b.	Car.payments.fc	or. Vehicle 2	17b	
	17c.	Other. Specify:		17c	
18.			mony, maintenance, and support that you did not report as pay on line 5, Schedule I, Your Income (Official Form B 6I).	18	
19.	Othe Spec		make to support others who do not live with you.	19.	
20.	Othe		xpenses not included in lines 4 or 5 of this form or on one.		
	20a.	Mortgages.on.ot	ther.property	20a	
	20b	Real estate taxe	os	20b	
	20c.	Property, homeo	owner's, or renter's insurance	20c.	
	20d.	Maintenance, re	pair, and upkeep expenses		
	20 <b>e</b>	Homeowner's as	ssociation.or.condominium.dues		

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Deb	tor 1 All	en		Holmes	Case number (if know	n) <u>15-32515-H2-13</u>
	First	t Name	Middle Name	Last Name		
21.	Other.	Specify:	See continuation sheet		21.	+\$386.90
22.			penses. Add lines 4 throug monthly expenses	h 21.	22.	\$2,978.96
23.	Calculat	te your m	onthly net income.			
	23aC	.apy.line.1	2.(your.combined.monthly.in	come) from Schedule I	23a.	\$5,380.52
	23bC	ору, уоиг.	monthly expenses from line.2	2 above	23b.	\$2978.96
			our monthly expenses from your monthly expenses	our monthly income.	23c.	\$2401.56
24.	Do you	expect a	n increase or decrease in ye	our expenses within the year a	after you file this form?	
				your car loan within the year or modification to the terms of you		
	₩ No.					
	Yes	Explain None.				

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Debtor 1 Allen		Holmes	Case number (if known)	15-32515-H2-13		
First Name	Middle Name	Last Name				
21. Other. Specify:						
Emergency Savings	s Fund - \$100					
Pet Expenses \$32	2.62					
Gifts- \$64.28			Total:	\$386.90		

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B6 Declaration (Official Form 6 - Declaration) (12/07) In re Allen Holmes Rosanne Holmes

Case No. <u>15-32515-H2-13</u> (if known)

# DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	eclare under penalty of perjury that I have read the fo and that they are true and correct to the best of my k	• • • • • • • • • • • • • • • • • • • •
Date _	03/01/2016	Signature Allan Halman
Date	03/01/2016	Allen Holmes Signature
		Rosanne Holmes  [If ioint case, both spouses must sign.]